

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

RECEIVED

MAR 29 2004

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY
AZ CORPORATION COMMISSION
DIRECTOR OF UTILITIES

W-02486A
Jackson Spring Estates Home and Property Owners
Association
4439 E. Hobart
Mesa AZ 852054125

ANNUAL REPORT

FOR YEAR ENDING

| | | |
|----|----|------|
| 12 | 31 | 2003 |
|----|----|------|

FOR COMMISSION USE

| | |
|-------|----|
| Ann04 | 03 |
|-------|----|

COMPANY INFORMATION

Company Name (Business Name) JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSOCIATION

Mailing Address 4439 E. HOBART
(Street)
MESEA AZ 85205-4125
(City) (State) (Zip)

480 832 2613 480 540 1683
Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

Email Address _____

Local Office Mailing Address SAME AS ABOVE
(Street)

(City) (State) (Zip)

Local Office Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

Email Address _____

MANAGEMENT INFORMATION

Management Contact: CHARLES SNIDER PRESIDENT
(Name) (Title)

P.O. BOX 810 ALPINE AZ 85920
(Street) (City) (State) (Zip)
928 339 4519 NONE NONE
Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

Email Address NONE

On Site Manager: SAME AS MANAGEMENT CONTACT
(Name)

(Street) (City) (State) (Zip)

Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

Email Address _____

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: WADE NOBLE

(Name)

2260 S. 4TH AVE YUMA AZ 85364
(Street) (City) (State) (Zip)

928 783 8321
Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

Attorney: _____
(Name)

(Street) (City) (State) (Zip)

Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

OWNERSHIP INFORMATION

Check the following box that applies to your company:

- | | |
|--|---|
| <input type="checkbox"/> Sole Proprietor (S) | <input type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P) | <input type="checkbox"/> Subchapter S Corporation (Z) |
| <input type="checkbox"/> Bankruptcy (B) | <input type="checkbox"/> Association/Co op (A) |
| <input type="checkbox"/> Receivership (R) | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other (Describe) <u>HOME OWNERS ASSOCIATION</u> | |

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

- | | | |
|--|-----------------------------------|-----------------------------------|
| <input checked="" type="checkbox"/> APACHE | <input type="checkbox"/> COCHISE | <input type="checkbox"/> COCONINO |
| <input type="checkbox"/> GILA | <input type="checkbox"/> GRAHAM | <input type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ | <input type="checkbox"/> MARICOPA | <input type="checkbox"/> MOHAVE |
| <input type="checkbox"/> NAVAJO | <input type="checkbox"/> PIMA | <input type="checkbox"/> PINAL |
| <input type="checkbox"/> SANTA CRUZ | <input type="checkbox"/> YAVAPAI | <input type="checkbox"/> YUMA |
| <input type="checkbox"/> STATEWIDE | | |

COMPANY NAME

JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS
ASSNUTILITY PLANT IN SERVICE

| Acct. No. | DESCRIPTION | Original Cost (OC) | Accumulated Depreciation (AD) | O.C.L.D. (OC less AD) |
|--------------|---|-----------------------|-------------------------------------|--------------------------|
| 301 | Organization | | | |
| 302 | Franchises | | | |
| 303 | Land and Land Rights | 4 000 | | |
| 304 | Structures and Improvements | 16450 | 14807 | 1643 |
| 307 | Wells and Springs | 3900 | 3510 | 390 |
| 311 | Pumping Equipment | 25 000 | 22500 | 2500 |
| 320 | Water Treatment Equipment | | | |
| 330 | Distribution Reservoirs and Standpipes | | | |
| 331 | Transmission and Distribution Mains | | | |
| 333 | Services | | | |
| 334 | Meters and Meter Installations | | | |
| 335 | Hydrants | | | |
| 336 | Backflow Prevention Devices | | | |
| 339 | Other Plant and Misc. Equipment | 81 000 | 72900 | 8100 |
| 340 | Office Furniture and Equipment | | | |
| 341 | Transportation Equipment | | | |
| 343 | Tools, Shop and Garage Equipment | | | |
| 344 | Laboratory Equipment | | | |
| 345 | Power Operated Equipment | | | |
| 346 | Communication Equipment | | | |
| 347 | Miscellaneous Equipment | | | |
| 348 | Other Tangible Plant | | | |
| | TOTALS | 130 350 | 113717 | 12633 |

This amount goes on the Balance Sheet Acct. No. 108

COMPANY NAME

JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN.

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

| Acct. No. | DESCRIPTION | Original Cost (1) | Depreciation Percentage (2) | Depreciation Expense (1x2) |
|--------------|--|----------------------|-----------------------------------|----------------------------------|
| 301 | Organization | | | |
| 302 | Franchises | | | |
| 303 | Land and Land Rights | 4 000 | | |
| 304 | Structures and Improvements | 16 450 | 5% | 823 |
| 307 | Wells and Springs | 39 00 | 5% | 195 |
| 311 | Pumping Equipment | 25 000 | 5% | 1250 |
| 320 | Water Treatment Equipment | | | |
| 330 | Distribution Reservoirs and Standpipes | | | |
| 331 | Transmission and Distribution Mains | | | |
| 333 | Services | | | |
| 334 | Meters and Meter Installations | | | |
| 335 | Hydrants | | | |
| 336 | Backflow Prevention Devices | | | |
| 339 | Other Plant and Misc. Equipment | 81 00 | 5% | 4050 |
| 340 | Office Furniture and Equipment | | | |
| 341 | Transportation Equipment | | | |
| 343 | Tools, Shop and Garage Equipment | | | |
| 344 | Laboratory Equipment | | | |
| 345 | Power Operated Equipment | | | |
| 346 | Communication Equipment | | | |
| 347 | Miscellaneous Equipment | | | |
| 348 | Other Tangible Plant | | | |
| | TOTALS | 130 350 | | 6318 |

This amount goes on Comparative Statement of Income and Expense
Acct. No. 403.

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN

BALANCE SHEET

| Acct. No. | | BALANCE AT BEGINNING OF YEAR | BALANCE AT END OF YEAR |
|--------------|---|------------------------------------|------------------------------|
| | ASSETS | | |
| | | | |
| | CURRENT AND ACCRUED ASSETS | | |
| 131 | Cash | \$ 8025 | \$ 9209 |
| 134 | Working Funds | | |
| 135 | Temporary Cash Investments | | |
| 141 | Customer Accounts Receivable | | |
| 146 | Notes/Receivables from Associated Companies | | |
| 151 | Plant Material and Supplies | | |
| 162 | Prepayments | | |
| 174 | Miscellaneous Current and Accrued Assets | | |
| | TOTAL CURRENT AND ACCRUED ASSETS | \$ 8025 | \$ 9209 |
| | | | |
| | FIXED ASSETS | | |
| 101 | Utility Plant in Service | \$ 126 350 | \$ 126 350 |
| 103 | Property Held for Future Use | | |
| 105 | Construction Work in Progress | | |
| 108 | Accumulated Depreciation – Utility Plant | 107 399 | 113 711 |
| 121 | Non-Utility Property | | |
| 122 | Accumulated Depreciation – Non Utility | | |
| | TOTAL FIXED ASSETS | \$ 18951 | \$ 126 33 |
| | | | |
| | TOTAL ASSETS | \$ 26976 | \$ 21842 |

NOTE: The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN

BALANCE SHEET (CONTINUED)

| Acct. No. | | BALANCE AT BEGINNING OF YEAR | BALANCE AT END OF YEAR |
|--------------|---|------------------------------------|------------------------------|
| | LIABILITIES | | |
| | CURRENT LIABILITIES | | |
| 231 | Accounts Payable | \$ | \$ |
| 232 | Notes Payable (Current Portion) | | |
| 234 | Notes/Accounts Payable to Associated Companies | | |
| 235 | Customer Deposits | | |
| 236 | Accrued Taxes | | |
| 237 | Accrued Interest | | |
| 241 | Miscellaneous Current and Accrued Liabilities | | |
| | TOTAL CURRENT LIABILITIES | \$ 0 | \$ 0 |
| | LONG-TERM DEBT (Over 12 Months) | | |
| 224 | Long-Term Notes and Bonds | \$ 0 | \$ 0 |
| | DEFERRED CREDITS | | |
| 251 | Unamortized Premium on Debt | \$ | \$ |
| 252 | Advances in Aid of Construction | | |
| 255 | Accumulated Deferred Investment Tax Credits | | |
| 271 | Contributions in Aid of Construction | | |
| 272 | Less: Amortization of Contributions | | |
| 281 | Accumulated Deferred Income Tax | | |
| | TOTAL DEFERRED CREDITS | \$ 0 | \$ 0 |
| | TOTAL LIABILITIES | \$ 0 | \$ 0 |
| | CAPITAL ACCOUNTS | | |
| 201 | Common Stock Issued | \$ | \$ |
| 211 | Paid in Capital in Excess of Par Value | | |
| 215 | Retained Earnings | | |
| 218 | Proprietary Capital (Sole Props and Partnerships) | | |
| | TOTAL CAPITAL | \$ 0 | \$ 0 |
| | TOTAL LIABILITIES AND CAPITAL | \$ 0 | \$ 0 |

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

| Acct. No. | OPERATING REVENUES | PRIOR YEAR | CURRENT YEAR |
|-----------|---|------------|--------------|
| 461 | Metered Water Revenue | \$ | \$ |
| 460 | Unmetered Water Revenue | 3813 | 3220 |
| 474 | Other Water Revenues | | 150 |
| | TOTAL REVENUES | \$ 3813 | \$ 3370 |
| | | | |
| | OPERATING EXPENSES | | |
| 601 | Salaries and Wages | \$ 550 | \$ 0 |
| 610 | Purchased Water | | |
| 615 | Purchased Power | 500 | 1400 |
| 618 | Chemicals | | |
| 620 | Repairs and Maintenance | 423 | 581 |
| 621 | Office Supplies and Expense | 48 | 31 |
| 630 | Outside Services | | |
| 635 | Water Testing | 52 | 113 |
| 641 | Rents | | |
| 650 | Transportation Expenses | | |
| 657 | Insurance – General Liability | 662 | 838 |
| 659 | Insurance - Health and Life | | |
| 666 | Regulatory Commission Expense – Rate Case | | |
| 675 | Miscellaneous Expense | 70 | 60 |
| 403 | Depreciation Expense | 6318 | 6318 |
| 408 | Taxes Other Than Income | 133 | 233 |
| 408.11 | Property Taxes | 130 | 127 |
| 409 | Income Tax | | |
| | TOTAL OPERATING EXPENSES | \$ 8886 | \$ 9701 |
| | | | |
| | OPERATING INCOME/(LOSS) | \$ | \$ |
| | | | |
| | OTHER INCOME/(EXPENSE) | | |
| 419 | Interest and Dividend Income | \$ | \$ |
| 421 | Non-Utility Income | 1410 | 1320 |
| 426 | Miscellaneous Non-Utility Expenses | | |
| 427 | Interest Expense | | |
| | TOTAL OTHER INCOME/(EXPENSE) | \$ 1410 | \$ 1320 |
| | | | |
| | NET INCOME/(LOSS) | \$ (3658) | \$ (5011) |

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS

ASSN

SUPPLEMENTAL FINANCIAL DATA

Long-Term Debt

| | LOAN #1 | LOAN #2 | LOAN #3 | LOAN #4 |
|------------------------|---------|---------|---------|---------|
| Date Issued | | | | |
| Source of Loan | | | | |
| ACC Decision No. | | | | |
| Reason for Loan | | | | |
| Dollar Amount Issued | \$ | \$ | \$ | \$ |
| Amount Outstanding | \$ | \$ | \$ | \$ |
| Date of Maturity | | | | |
| Interest Rate | | | | |
| Current Year Interest | \$ | \$ | \$ | \$ |
| Current Year Principle | \$ | \$ | \$ | \$ |

Meter Deposit Balance at Test Year End

\$ NA

Meter Deposits Refunded During the Test Year

\$ NA

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS
ASSN

WATER COMPANY PLANT DESCRIPTION

WELLS

| ADWR ID Number* | Pump Horsepower | Pump Yield (Gpm) | Casing Depth (Feet) | Casing Diameter (Inches) | Meter Size (inches) | Year Drilled |
|--------------------|--------------------|---------------------|---------------------------|--------------------------------|------------------------|-----------------|
| 040105 | 1 1/2 | 25 | 6' | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

- Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

| Name or Description | Capacity (gpm) | Gallons Purchased or Obtained (in thousands) |
|---------------------|-------------------|---|
| | | |
| NA | | |

| BOOSTER PUMPS | | FIRE HYDRANTS | |
|---------------|----------|-------------------|----------------|
| Horsepower | Quantity | Quantity Standard | Quantity Other |
| | 2 | | 1 |
| | | | |
| | | | |
| | | | |

| STORAGE TANKS | | PRESSURE TANKS | |
|---------------|----------|----------------|----------|
| Capacity | Quantity | Capacity | Quantity |
| 15,000 | 1 | | 6 |
| | | | |
| | | | |
| | | | |

COMPANY NAME JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

| Size (in inches) | Material | Length (in feet) |
|------------------|----------|------------------|
| 2 | | |
| 3 | | |
| 4 | PVC | APRX 2000 |
| 5 | | |
| 6 | PVC | APRX 2500 |
| 8 | | |
| 10 | | |
| 12 | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

CUSTOMER METERS

| Size (in inches) | Quantity |
|------------------|----------|
| 5/8 X 3/4 | |
| 3/4 | |
| 1 | |
| 1 1/2 | |
| 2 | NONE |
| Comp. 3 | |
| Turbo 3 | |
| Comp. 4 | |
| Turbo 4 | |
| Comp. 6 | |
| Turbo 6 | |
| | |
| | |
| | |

For the following three items, list the utility owned assets in each category.

TREATMENT EQUIPMENT:

NONE

STRUCTURES:

PUMP HOUSE

OTHER:

COMPANY NAME: JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2003

| MONTH | NUMBER OF CUSTOMERS | GALLONS SOLD | GALLON PUMPED (Thousands) |
|-----------|---------------------|--------------|---------------------------|
| JANUARY | 12 | | |
| FEBRUARY | 12 | | |
| MARCH | 12 | | |
| APRIL | 12 | | |
| MAY | 12 | N/A | |
| JUNE | 12 | | |
| JULY | 12 | | |
| AUGUST | 11 | | |
| SEPTEMBER | 11 | | |
| OCTOBER | 11 | | |
| NOVEMBER | 11 | | |
| DECEMBER | 11 | | |
| TOTAL | | N/A | |

Is the Water Utility located in an ADWR Active Management Area (AMA)?

() Yes (X) No

Does the Company have An ADWR Gallons Per Capita Per Day (GPCPD) requirement?

() Yes (X) No

If yes, provide the GPCPD amount: _____

What is the level of arsenic for each well on your system. _____ mg/l

(If more than one well, please list each separately) TESTING NOT REQUIRED DUE TO LIMITED CUSTOMERS

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME JACKSON SPRING ESTATES HOME AND YEAR ENDING 12/31/2003
PROPERTY OWNERS ASSN

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2003 was: \$ 127.20

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. _____

03 F - 50265
WELLS FARGO BANK 182
1 EAST 16TH STREET YUMA, AZ 85364
8040747 DATE Sept 29 2003
PAY TO THE ORDER OF Betty M. Montoya, April G. Trece \$ 40.72
Forty & 72/100 DOLLARS
JACKSON SPRING ESTATES
HOME & PROPERTY OWNERS ASSOC.
P. O. BOX 20394
MESA, AZ 85277-0394
MEMO 945 80 702 A 0 Dean M. Coate
⑆122105524⑆0808750269⑆0182 ⑆0000004072⑆

03 F - 50264
WELLS FARGO BANK 183
1 EAST 16TH STREET YUMA, AZ 85364
8040746 DATE Sept 29 2003
PAY TO THE ORDER OF Betty M. Montoya, April G. Trece \$ 86.48
Eighty Six & 48/100 DOLLARS
JACKSON SPRING ESTATES
HOME & PROPERTY OWNERS ASSOC.
P. O. BOX 20394
MESA, AZ 85277-0394
MEMO 945-80-703 5 Dean M. Coate
⑆122105524⑆0808750269⑆0183 ⑆0000008648⑆

COMPANY NAME JACKSON SPRING ESTATES HOME AND YEAR ENDING 12/31/2003
PROPERTY OWNERS ASSN.
INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported 0
Estimated or Actual Federal Tax Liability 0

State Taxable Income Reported 0
Estimated or Actual State Tax Liability 0

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances 0
Amount of Gross-Up Tax Collected 0
Total Grossed-Up Contributions/Advances 0

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

SIGNATURE

DATE

PRINTED NAME

TITLE

VERIFICATION
AND
SWORN STATEMENT
Intrastate Revenues Only

RECEIVED

MAR 29 2004

VERIFICATION

STATE OF _____

I, THE UNDERSIGNED

OF THE

| | |
|--------------------------------|---|
| COUNTY OF (COUNTY NAME) | APACHE |
| NAME (OWNER OR OFFICIAL) TITLE | NEVA M. COESTER SECY / TREAS |
| COMPANY NAME | JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN. |

**ARIZONA CORPORATION COMMISSION
DIRECTOR OF UTILITIES**

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

| | | |
|-------|-----|------|
| MONTH | DAY | YEAR |
| 12 | 31 | 2003 |

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2003 WAS:

Arizona IntraState Gross Operating Revenues Only (\$)

\$ 4540.

(THE AMOUNT IN BOX ABOVE
INCLUDES \$ 232.76
IN SALES TAXES BILLED, OR COLLECTED

****REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)**

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

25

DAY OF

(SEAL)

MY COMMISSION EXPIRES

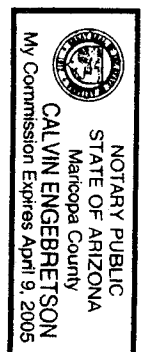
4-9-05

SIGNATURE OF OWNER OR OFFICIAL

TELEPHONE NUMBER

| | |
|-------------|--------------|
| COUNTY NAME | |
| Maricopa | |
| MONTH | 20 <u>04</u> |
| March | |

SIGNATURE OF NOTARY PUBLIC



VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE
INTRASTATE REVENUES ONLY

RECEIVED

MAR 29 2004

AZ CORPORATION COMMISSION
DIRECTOR OF UTILITIES

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

| | |
|--|------------------------------|
| (COUNTY NAME) <u>APACHE</u> | |
| NAME (OWNER OR OFFICIAL) <u>NEVA M. COESTER</u> | TITLE <u>SECT / TREAS</u> |
| COMPANY NAME <u>JACKSON SPRING ESTATES HOME AND PROPERTY OWNERS ASSN.</u> | |

| | | |
|--------------------|------------------|---------------------|
| MONTH <u>12</u> | DAY <u>31</u> | YEAR <u>2003</u> |
|--------------------|------------------|---------------------|

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

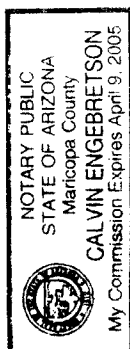
IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2003 WAS:

| |
|---|
| ARIZONA INTRASTATE GROSS OPERATING REVENUES |
| \$ <u>4540</u> |

(THE AMOUNT IN BOX AT LEFT
INCLUDES \$ 232.76
IN SALES TAXES BILLED, OR COLLECTED

***RESIDENTIAL REVENUE REPORTED ON THIS PAGE
MUST INCLUDE SALES TAXES BILLED.**

Neva M. Coester
SIGNATURE OF OWNER OR OFFICIAL



SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

| |
|-----------|
| <u>25</u> |
|-----------|

DAY OF

(SEAL)

MY COMMISSION EXPIRES 4-9-05

| | |
|--|----------------|
| NOTARY PUBLIC NAME <u>Calvin Engbretson</u> | |
| COUNTY NAME <u>Maricopa</u> | |
| MONTH <u>March</u> | . 20 <u>04</u> |

X *Calvin Engbretson*
SIGNATURE OF NOTARY PUBLIC